CLAIMS ONLY

Application Number: 10/713575

Filing Date:

Applicant(s):

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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2		/		/								
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50												
Total Indep	3		2									
Total Depend	17		14									
Total Claims	20		16									

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Depend						
Total Claims						